NWS CHANGE FORM
PART A

	1. DATE SUBMITTED
	7/11/00

This form is in three parts. Submitters must complete unshaded blocks in Part A and as much of Part B as possible. WSH will complete Part C (implementation details). If there is no specific required change date, enter 60 days from date submitted. Address questions to NWS Change Management at (301) 713-1373. Submit change requests to the NWSRC mailbox (External: NWSRC@noaa.gov).

2. ORIGINATOR OFFICE	3. SUBMITTING AUTHORITY	4. COGNIZANT TECHNICAL INDIVIDUAL	5. ORIGINATOR TRACKING NUMBER
W/OM22	Name: Greg Mandt Routing Code: W/OM2	Name: Jim Heil Routing Code: W/OM22 Phone: 301.713.-1867 ext 111	OM-00-711

6. SYSTEMS AFFECTED BY CHANGE

☐ DATA PRODUCTS (Complete Data Products Supplement)

☐ ASOS   ☒ AWIPS   ☐ CRS   ☐ NEXRAD   ☐ OTHER (specify) _____

7. WSH TRACKING NUMBER

NWS 611

8. TITLE OF CHANGE
NESDIS ICD Update to Enable New Processes on AWIPS

9. TYPE OF CHANGE

☐ HARDWARE   ☐ SOFTWARE   ☒ DOCUMENTATION ONLY

10. SITES AFFECTED (Attach Part B, Page 2, if needed)
ALL

11. STATEMENT OF REQUIREMENT, PROBLEM, OR DEFICIENCY OF EXISTING SYSTEM (Include problem report reference numbers.)
Currently there is no provisions in the NESDIS ICD which will allow information in the header to do: 1) new requested local processes call parallax error correction in determining the exact location of storm cloud tops and 2) new centralized processing of non CONUS sectors over the CONUS (this is call floating sectors).

12. KNOWN OR PROPOSED SOLUTION (Include source and description of new features or data products.)
Change the NESDIS ICD. The changes allow for the remapping of all satellite data, not just GOES. This will enable individual passes of polar satellite data, as well as sub sectors of the normal GOES CONUS scan (allows 30 second and 1 & 3 minute sectors to be displayed on AWIPS by adding the upper right hand corner of the sector), these are both known as floating sectors. Also adds the satellite sub point information to aid in the local calculation of parallax error correction. Tables 4.4.A and 4.4.B were changed to include satellite sub point and upper right corner of image to provide information needed to calculated parallax error and to display floating sectors. Table 4.5 was changed to include those satellites for the floating points and to add the new GOES satellites currently under contract to be delivered to NOAA. Table 4.6 was changed to add the floating sectors.

13. ALTERNATE SOLUTIONS
NONE

14. REQUIRED CHANGE DATE 12/01/00	15. RATIONALE FOR REQUIRED CHANGE DATE (Include proposed priority, if known.) The priority is routine, at this point. The change to the ICD needs to be in place by December so that NESDIS can provide test products for the next AWIPS build cycle.

CCB/PMC/CMB DECISION

16. DECISION AUTHORITY LEVEL	☐ CCB LEVEL ONLY	☐ PMC or NWS CMB DECISION REQUIRED

17. CCB LEVEL DECISION	☐ APPROVED ☐ RECOMMEND APPROVAL ☐ DISAPPROVED	SIGNATURE DATE SIGNED

FOR USE ONLY WHEN PMC or NWS CMB DECISION REQUIRED

18. PMC OR NWS CMB DECISION	☐ APPROVED ☐ DISAPPROVED	SIGNATURE DATE SIGNED

NWS CHANGE FORM
PART A - DATA PRODUCTS SUPPLEMENT

NWS CHANGE FORM — **PART A - DATA PRODUCTS SUPPLEMENT**	**1. ORIGINATOR TRACKING NUMBER**
This information is required for Data Products submissions. (Submitters should complete all applicable blocks, if known. WSH will assist.) Attach extra pages if necessary.	**2. WSH TRACKING NUMBER** nws 611

3. AWIPS ID		4. AFOS PIL			5. WMO HEADER	6. ADD REV DEL	7. SEAS Y/N	8. CHAR PER MSG	9. FREQUENCY	10. NWSTG DISTR	11. AFOS DISTR	NWWS ONLY		
NNN	XXX	CCC	NNN	XXX								12. STATE CIRCUITS	13. PRIME UPLINK	14. B/U UPLINK

FOR METAR CHANGES ONLY								19. INTERNAL NWS USE ONLY ☐	20. PRODUCT SOURCE	21. AWIPS DATA TYPE	
15. COMMS ID	16. N. LATITUDE			17. W. LONGITUDE			18. ELEV (M)	22.	A. CHANGE NOTICE	B. EFFECTIVE DATE	C. ISSUE DATE
	DEG	MIN	SEC	DEG	MIN	SEC		AWIPS			
								AFOS			
								NWWS			

NWS CHANGE FORM PART B	1. ORIGINATOR TRACKING NUMBER
All RC/ECP submissions must also address the following information. Indicate if any areas are unknown or do not apply. State why information is unknown and when it will be available. Attach extra pages if necessary, referencing each applicable subject.	2. WSH TRACKING NUMBER NWS 611

FUNDING INFORMATION

Estimate costs and indicate known sources of funding. (Include travel time, installation time, administrative time, and software development time when applicable.)	3. SOURCE OF FUNDING	4. TOTAL COST $
5. DEVELOPMENT COSTS (Estimate development costs)		AMOUNT
6. OPERATIONAL TEST AND EVALUATION COSTS (Estimate test and evaluation costs)		AMOUNT
7. PRODUCTION COSTS (Include acquisition, kit proofing, spares, delivery, and documentation costs)		AMOUNT
8. COMMUNICATIONS SERVICE/CIRCUITS COSTS (Include installation and recurring costs)		AMOUNT
9. IMPLEMENTATION SUPPORT COSTS (Include travel, installation, and administrative costs)		AMOUNT
9A. LIFE CYCLE SUPPORT COSTS (Less communications service/circuits)		AMOUNT

SUPPORTING INFORMATION AND SCHEDULES
Provide detailed information needed to implement the requested change.

10. DEVELOPMENT STATUS/SCHEDULE (Major milestones such as Start, Beta Test, and OT&E)	11. PRODUCTION STATUS/SCHEDULE (Major milestones such as Solicitation, Contract Start Date, Delivery Date, Kit Proofing, etc.)
12. IMPLEMENTATION/RETROFIT SCHEDULE	13. FACILITY INFORMATION (Attach facility drawings/plans.)
14. COMMUNICATIONS INSTALLED (Type required, who will order, and associated hardware required; attach Part B, Page 2, if needed.)	15. COMMUNICATIONS SERVICE/CIRCUITS TO BE REMOVED
16. REQUIRED CLEARANCES, WAIVERS, AND LICENSES (Include person or organization responsible for obtaining each)	17. COORDINATION OF CHANGE WITH OTHER CHANGES
18. PHYSICAL ITEMS AND DOCUMENTS AFFECTED (Include part, serial, and document numbers. Attach Part B, Page 2, if needed.)	19. STAFF RESOURCE IMPACTS (Skills and workload impact on maintainers, operators, and managers.)
20. LOGISTICS IMPACTS (Include facilities, maintenance, training, and support equipment impacts.)	21. OPERATIONAL IMPACTS (Include continuity and back up needs and plans.)
22. ADDITIONAL MAJOR CHANGE ACTIVITIES (Include who will accomplish each of them and staff hours required.)	

NWS CHANGE FORM PART B - PHYSICAL ITEM AND DOCUMENT IMPACT MATRIX SUPPLEMENT							1. ORIGINATOR TRACKING NUMBER			
This information is required prior to publication of Engineering Modification Notes and Software Release Notes. List physical items to be replaced and specify any changes in related documentation. (Submitters should complete this information, if known. WSH will assist.)							2. WSH TRACKING NUMBER NWS 611			
3. ITEM NAME, CIRCUIT TYPE, SOFTWARE VERSION, OR SITE LOCATION	4. REMOVE REPLACE MODIFY	5. SUPERSEDED ITEM OR CONFIGURATION		6. SUPERSEDING PART NUMBER OR NEW CONFIGURATION	7. DOC TYPE	8. SUPERSEDED DOCUMENT		9. SUPERSEDING DOCUMENT	
		A. PART NUMBER OR CONFIGURATION	B. SERIAL NUMBER(S) OR COMMENTS			A. IDENTIFIER	B. REV	A. IDENTIFIER	B. REV
					TBD				

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NWS CHANGE FORM
PART C

WSH is responsible for Part C, but submitters may complete sections that would help clarify the change requirement or the necessary implementation actions.

1. ORIGINATOR TRACKING NUMBER

2. WSH TRACKING NUMBER

NWS 611

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3. CCB COST EVALUATION

NWS COST $ FAA COST $ DOD COST $ OTHER AGENCY COST $ TOTAL COST $
                                                     (SPECIFY)_____

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4. IMPLEMENTATION DOCUMENTS REQUIRED

☐ Engineering Modification Note   ☐ Software Release Notes   ☐ Other Document (Specify)_____

ADDITIONAL IMPLEMENTATION INSTRUCTIONS (e.g., Implementation schedule, parts shipping instructions, equipment disposal procedures, additional documentation required, and status reporting instructions.) Include documentation, data input, notification vehicle, or specific action step required to verify completion of the implementation activity.

5. IMPLEMENTATION ACTIVITY REQUIRED	6. REQUIRED COMPLETION DATE	7. RESPONSIBLE PERSON AND OFFICE	8. DOCUMENT OR ACTION REQUIRED TO VERIFY COMPLETION
Coordinate review of ICD. Update if required. Distribute Updated document / change pages			

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